NORTHERN NEVADA ADULT MENTAL HEALTH

POLICY AND PROCEDURE DIRECTIVE

SUBJECT: TRAINING AND ROLE PROFICIENCY Page 1 of 9

NUMBER: NN-HR-27

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REVIEW/REVISE DATE: 3/19/09, 5/20/10

APPROVAL: Rosalyne Reynolds {s}, Agency Director

#### I. PURPOSE:

The purpose of this policy is to clarify required training and demonstrable competencies necessary for successful employee performance at Northern Nevada Adult Mental Health Services (NNAMHS). NNAMHS recognizes that clear and regular communication is key to growth and development. While training is a key component in attaining success in performance, other key components include clearly communicated expectations, consistent coaching and accurate and timely employee appraisals,

# II. DEFINITIONS

Training /education is a formalized means of providing information to enable an employee to learn required information to better utilize their skills and abilities. Testing is included.

Competency in performance is the measureable, observable ability to perform the essential functions of the role. It is a measure of how well the employee has anchored the knowledge attained through educational opportunities and is able to apply it to the job.

Clinical Employees include: All licensed clinicians, Psychiatric Caseworkers, Mental Health Counselors and Mental Health Technicians.

# III. POLICY

It is the policy of NNAMHS to ensure that staff are competent to perform the duties they are assigned. It is our goal to evaluate, measure, and increase the quality of staff competency and to provide the appropriate tools and resources to ensure employees are successful in their role.

#### IV. REFERENCES

Division of MHDS Policies:

- 2.001 Client Rights
- 2.002 Reporting of Denial of Rights
- 2.003 Abuse or Neglect of Clients
- 2.005 Restraint/Seclusion of Clients
- 2.015 Conflict Prevention and Response Training Certification Requirements
- 2.053 LOCUS Assessment
- 2.068 Email Use
- 2.067 Cultural Competence

- 4.030 Basic Documentation Guidelines for Medical Records
- 4.037 Professional Behavior
- 4.029 Suicide Risk Procedure
- 5.006 Work Performance Standards/Employee Development Reports
- 6.001 HIPAA Policies
- 6.014 Employee Training Requirements.
- 6.069 Management of AWOL Episodes

**NNAMHS** Policies

NN-HR-21 Orientation for New Employees

NN-HR-24 Avatar and EMR Training

# V. PROCEDURE

- A. The goals of a successful educational program include:
  - To ensure employees receive the training and development necessary to be successful in their role;
  - To provide a basis for development, growth and evaluation;
  - To maintain proficiency in the essential functions of the employees role;
  - To increase production and performance;
  - To maximize usage of human resources and financial resources;
  - To maintain compliance and Joint Commission/CMS accreditation;
  - To ultimately ensure the highest level of patient safety and quality of care.

- B. Three major factors that affect how an individual performs are:
  - Individual ability to do the work (Competency)
  - Effort expended to fulfill expectations (Performance)
  - Organizational support (Training, Coaching and Development)

C. Training: While annual training is required in many areas, competency is measured by the quality and level of work performance. Supervisors are responsible for ensuring that their employees are competent. Training may be mandatory when there is a gap in the ability to complete a task with competence.

- 1. Upon hire all employees will complete an initial orientation which provides introductory training in the following areas:
- Fire, Safety, and Disaster
- Consumer Rights, Abuse and Neglect
- Seclusion and Restraint Initiative
- Progress notation/medical records/ treatment planning
- Emergency evacuation
- Suicide Prevention and Assessment

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- Avatar Training-All relevant staff
- Online information security training
- Cultural Competency

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- Sexual Harassment (within 6 months of employment)
- Infection Control and Standard Precautions
- HIPAA/Confidentiality

- 2. Clinical Staff will also complete the following training opportunity upon hire:
- LOCUS
- Pain Assessment
- NNAMHS Employees will complete the following training on an annual basis:
- Dealing with Difficult People (Risk Management)
- Cultural Competency
- Fire, Safety, Disaster and Health/Infection Control and Standard Precautions

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- AVATAR-(When necessary for performance of essential functions)
- Abuse and Neglect and Consumer Rights
- Professional Behavior of Division Employees
- HIPAA/Confidentiality
- Information Technology Training
- 4. NNAMHS Clinical employees will also complete the following training on an annual basis:
- Suicide Prevention/Assessment-All Clinical Staff
- Seclusion and Restraint-All Medical Staff and All Inpatient Nursing Staff
- 5. NNAMHS Employees will complete the following training on a bi-annual basis:
- Sexual Harassment Prevention Revisited
- CPART
- CPR-All relevant staff/emergency Responders
- 6. NNAMHS Clinical employees will also complete the following training on a biannual basis:
- Pain Assessment

- 7. NNAMHS Employees will complete the following training on a tri-annual basis:
- Fire Extinguisher Training
- NNAMHS Employees will complete the following training every four years:
- Defensive Driving Risk Management Class
- 9. NNAMHS Supervisors will have additional training obligations which include:
  - a. Within 6 months of appointment
    - o Evaluating Employee Performance
  - b. Within 12 months of appointment
    - Equal Employment Opportunity
    - Interviewing and Hiring
    - Alcohol and Drug Testing
    - Progressive Disciplinary Procedures
    - Handling Grievances
    - Risk Management-Workers Compensation Overview for Supervisors
    - Risk Management-Managing the Threat of Workplace Violence
    - Risk Management-Supervisor Safety Training
  - c. Within 3 years of appointment
    - The employee shall attend additional supervisory or managerial training which, when added to the amount of training listed in Section a and b, equals at least 40 hours. Training must either be hosted by the Department of Personnel or pre-approved by the Hospital Education Coordinator.

# d. Subsequent 3 year periods

The employee shall attend at least 40 hours of training to enhance supervisory or managerial skills. Such training must include at least two of the training classes listed in Section A. Training must either be hosted by the Department of Personnel or pre-approved by the Hospital Education Coordinator. An employee who receives credit for a training class described in Section A for a three year period will not receive credit for taking the same training class in the next two following 3 year periods.
Variations are at the discretion of and must be reviewed and approved by the appointing authority.

#### D. Measuring competency in performance:

- Assessing competency in performance considers how the knowledge and skills are used in the work setting.
- Supervisors are responsible for assuring staff competency related to the
  elements of the employee's job. One way competencies should be assessed is
  the observation and documentation review completed by the supervisors or in the
  case of medical staff, peer review may be used to assess competency.
- 3. Supervisors assess all clinical staff on an annual basis to ensure proficiency in:
  - Treatment Planning-All Clinical Staff
  - Progress Notation-All Clinical Staff
  - Mock Codes-All Clinical Staff
  - LOCUS-All Clinical Staff
  - Pain Assessment-All Clinical Staff
  - Out-Patient Emergency Behavior Management- All Outpatient Clinical Staff

- Emergency Cart-All Clinical Staff
- Vital sign competency for non-nurses
- 4. Nursing Staff are also assessed annually to ensure proficiency in:
  - Medication Reconciliation-All Clinical Nursing Staff
  - Medication Procedures (inpatient and outpatient)-All Clinical Nursing Staff
  - Abnormal Involuntary Movement Scale (AIMS) Testing-All Clinical Nursing
     Staff
  - Glucometer Competency-All Inpatient Nursing Staff
  - Proper Use of Pyxis (training and Supervision)-All Inpatient Nursing Staff
  - AWOL Policy Absent without Leave for In-patient staff only (MHDS 4.069)-All
     Inpatient Nursing Staff
- 5. Medical Staff will be assessed annually through peer review to ensure proficiency in:
  - Treatment Planning
  - Progress Notation
  - Medication Reconciliation

# E. Education Documentation

- 1. A copy of the orientation and annual statement of trainings will be recorded in the employee's educational record.
- Employees and supervisors may request a copy of a specific training record at any time by contacting the administrative assistant assigned to the Performance Improvement Department.
- Trainings arranged in NEATS are documented in the NEATS transcript.
   Employees can access their NEATS transcript through the NEATS site.

- Employees are responsible for documenting their attendance at agency sponsored trainings by signing attendance logs and maintaining attendance receipts or certificates provided.
- 5. Employees are responsible to ensure they have completed all required trainings and that they have documented such training in the training and competency spreadsheets available on the desktop links. These training records should be provided to the supervisor one month prior to the date of the annual appraisal for inclusion in the appraisal process.
- 6. Any lapse in training or loss of occupational license or certification due to a lapse in training may be disciplined up to and including termination of employment.